

# STATE OF TENNESSEE DEPARTMENT OF ENVIRONMENT AND CONSERVATION DIVISION OF WATER RESOURCES

William R. Snodgrass - Tennessee Tower 312 Rosa L. Parks Avenue, 11<sup>th</sup> Floor Nashville, Tennessee 37243-1102

February 9, 2015

Mr. Mark Johnson, Environmental Advisor ANR Pipeline Company, Piperton Replacement Project

e-copy: mark\_johnson@transcanada.com

700 Louisiana Street #700 Houston, TX 77002

Subject: **NPDES TNG670467** 

ANR Pipeline Company, Piperton Replacement Project

Piperton, Fayette County, Tennessee

Dear Mr. Johnson:

In accordance with the provisions of the Tennessee Water Quality Control Act (T.C.A. § 69-3-101 et. seq.) and Rule 1200-4-10, the Division of Water Resources (division) hereby notifies you of coverage under General NPDES Permit for Discharges of Hydrostatic Test Water Number TNG670000, effective as of February 05, 2015. This notice is sent in response to the notice of intent we received on February 05, 2015.

Enclosed is a Notice of Coverage which shows the facility name, location, effective date of coverage, etc.. Also enclosed is the Discharge Monitoring Report (DMR) form to be completed at the time of the discharge for all discharge locations. Simply fill in the appropriate Outfall number which corresponds to the Option number on your NOI drawings along with other appropriate data. Make copies of the form as necessary, the completed DMR shall be submitted to the Division postmarked no later than thirty days after the discharge occurs. You should also be aware that if you should use frac tanks or any similar vessel to store the water between tests, the tanks must be new or thoroughly cleaned and inspected for contamination by the permittee before use. We discourage use of such storage vessels in this manner and would encourage some other form of conserving water. If this is a one-time discharge, and you wish to terminate coverage under the permit, please indicate so using the check box located at the bottom of the DMR form.

If you have questions, please contact the division at the Memphis Environmental Field Office at 1-888-891-TDEC; or, at this office, please contact Mr. Paul Higgins at (615) 532-1178 or by E-mail at *Paul.Higgins@tn.gov*.

Sincerely,

Vojin Janjić

Manager, Water-based Systems

cc: Permit File

Memphis Environmental Field Office (Maylynne.Wilbert@tn.gov) Herry Shulz, Environmental Scientist, CH2M HILL, Herald.Shulz@CH2M.com Mr. Joe O'Steen, ROW / Land Agent, ANR Pipeline Co., joe\_osteen@transcanada.com



## Tracking No. TNG670467

Notice of Coverage under the General NPDES Permit for Discharges of

### HYDROSTATIC TEST WATER

Issued By

Tennessee Department of Environment and Conservation Division of Water Resources William R. Snodgrass - Tennessee Tower 312 Rosa L. Parks Avenue, 11<sup>th</sup> Floor Nashville, Tennessee 37243-1102

Under authority of the Tennessee Water Quality Control Act of 1977 (T.C.A. 69-3-101 <u>et seq.</u>) and the delegation of authority from the United States Environmental Protection Agency under the Federal Water Pollution Control Act, as amended by the Clean Water Act of 1977 (33 U.S.C. 1251, et seq.):

Discharger: ANR Pipeline Company, Piperton Replacement Project

is authorized to discharge: for Outfalls 001, 002, and 003, minimal discharge; hydrostatic

testing effluent to be infiltrated

from a facility located: Highway 57 and Highway 196 near the Wolf River, Piperton, in

**Fayette County** 

to receiving waters named: nearest stream unnamed tributary to Wolf River

in accordance with effluent limitations, monitoring requirements and other conditions set forth herein.

Coverage under this general permit shall become effective on February 05, 2015

and shall expire on March 16, 2016

Issuance date: February 05, 2015

Hydrostatic GP: <a href="http://www.state.tn.us/environment/wpc/forms/hydro\_gp.pdf">http://www.state.tn.us/environment/wpc/forms/hydro\_gp.pdf</a>

CN-0759 RDA 2366

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

Form Approved. OMB No. 2040-0004

| NAME     | Piperton Class Change Project  |     |
|----------|--------------------------------|-----|
| Address  | 700 Louisiana Street #700      |     |
|          | Houston, TX 77002              |     |
| FACILITY | ANR Pipeline Company, Piperton |     |
| LOCATION | Fayette County, Tennessee      |     |
|          | Attn: Mr. Mark Johnson         | FRO |

| DISCHARGE NUMBER |
|------------------|
|                  |

COVERAGE TERM: 05-FEB-15 TO 16-MAR-16

| MONITORING PERIOD |     |     |    |      |     |     |  |  |
|-------------------|-----|-----|----|------|-----|-----|--|--|
| YEAR              | Mon | DAY |    | YEAR | Mon | DAY |  |  |
|                   |     |     | То |      |     |     |  |  |

#### **NEW FACILITY**

NOTE: Read instructions before completing this form.

| PARAMETER  |   | QUANTITY OR LOADING  |  |   |                                    | QUALITY OR CONCENTRATION |         |      |           | Frequency             | SAMPLE TYPE |
|--|---|--|--|---|------------------------------------|--------------------------|---------|------|-----------|-----------------------|-------------|
|  |   | <b>A</b> VERAGE  | MAXIMUM  | Units   | MINIMUM                            | AVERAGE                  | MAXIMUM | UNIT | TS No. Ex | of Analysis           | SAMPLE TYPE |
| FLOW, Total  | SAMPLE<br>MEASUREMENT                     | *****  |  | (03)  | *****                              | *****                    | *****   | ***  | **        | 01/DS                 | EST         |
| 50050 1 0 0<br>EFFLUENT GROSS VALUE  | PERMIT<br>REQUIREMENT                     |  | E PER DAY,<br>otal   | MGD   | ******                             | *****                    | *****   | ***  | **        | Once per<br>Discharge | Estimate    |
| VISIBLE OIL  | SAMPLE<br>MEASUREMENT                     |  | ******   | (9P)  | ******                             | *****                    | *****   | ***  | **        | 01/DS                 | VIS         |
| М  | PERMIT<br>REQUIREMENT                     | REPORT   | *****  | YES=1<br>NO=0   | *****                              | *****                    | *****   | ***  | **        | Once per<br>Discharge | Visual      |
|  | SAMPLE<br>MEASUREMENT                     |  |  |   |                                    |                          |         |      |           |                       |             |
|  | PERMIT<br>REQUIREMENT                     |  |  |   |                                    |                          |         |      |           |                       |             |
|  | SAMPLE<br>MEASUREMENT                     |  |  |   |                                    |                          |         |      |           |                       |             |
|  | PERMIT<br>REQUIREMENT                     |  |  |   |                                    |                          |         |      |           |                       |             |
|  | SAMPLE<br>MEASUREMENT                     |  |  |   |                                    |                          |         |      |           |                       |             |
|  | PERMIT<br>REQUIREMENT                     |  |  |   |                                    |                          |         |      |           |                       |             |
|  | SAMPLE<br>MEASUREMENT                     |  |  |   |                                    |                          |         |      |           |                       |             |
| REQ<br>S<br>MEAS   | PERMIT<br>REQUIREMENT                     |  |  |   |                                    |                          |         |      |           |                       |             |
|  | SAMPLE<br>MEASUREMENT                     |  |  |   |                                    |                          |         |      |           |                       |             |
|  | PERMIT<br>REQUIREMENT                     |  |  |   |                                    |                          |         |      |           |                       |             |
| IAME/TITLE PRINCIPAL EXECUTIV  |   |  | at this document and   |   |                                    |                          |         | TE   | LEPHONE   |                       | DATE        |
|  | designed informatio manage the informatio | to assure that qualific<br>n submitted. Based on<br>ne system, or those p<br>n, the information su | ed personnel properl<br>on my inquiry of the poersons directly responsions to the best | y gather and evaluerson or persons on sible for gatherist of my knowledge | uate the<br>who<br>ng the<br>e and |                          |         |      |           |                       |             |
| belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.  ONMENT AND EXPLANATION OF ANY VIOLATIONS (Poterwise of attraction of the penaltic box) |   |  | ine and SIGN   | ATURE OF PRINCIPAL<br>FICER OR AUTHORIZ                                   |                                    | AREA<br>CODE             | NUMBER  | YEAR | MONTH DAY |                       |             |

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

☐ CHECK HERE IF THIS IS A ONE TIME DISCHARGE AND YOU REQUEST TERMINATION OF YOUR PERMIT.

EPA Form 3320-1 (Rev. 3/99) Previous Editions may be used.

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# Paperwork Reduction Act Notice

Public reporting burden for this collection of information is estimated to vary from a range of 10 hours as an average per response for some minor facilities, to 110 hours as an average per response for some major facilities, with a weighted average for major and minor facilities of 18 hours per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M Street, SW, Washington, DC 20460; and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, DC 20503.

## **General Instructions**

- If form has been partially completed by preprinting, disregard instructions directed at entry of that information already preprinted.
- Enter "Permittee Name/Mailing Address (and facility name/ location, if different)," "Permit Number," and "Discharge Number" where indicated. (A separate form is required for each discharge.)
- 3. Enter dates beginning and ending "Monitoring Period" covered by form where indicated.
- 4. Enter each "Parameter" as specified in monitoring requirements of permit.
- 5. Enter "Sample Measurement" data for each parameter under "Quantity" and "Quality" in units specified in permit. "Average" is normally arithmetic average (geometric average for bacterial parameters) of all sample measurements for each parameter obtained during "Monitoring Period"; "Maximum" and "Minimum" are normally extreme high and low measurements obtained during "Monitoring Period". (Note to municipals and secondary treatment requirement: Enter 30-day average of sample measurements under "Average", and enter maximum 7-day average of sample measurements obtained during monitoring period under "Maximum.")
- 6. Enter "Permit Requirement" for each parameter under "Quantity" and "Quality" as specified in permit.
- 7. Under "No Ex" enter number of sample measurements during monitoring period that exceeded maximum (and/or minimum or 7-day average as appropriate) permit requirement for each parameter. If none, enter "0".
- 8. Enter "Frequency of Analysis" both as "Sample Measurement" (actual frequency of sampling and analysis used during monitoring period) and as "Permit Requirement" specified in permit. (e.g. Enter "Cont," for continuous monitoring, "1/7" for one day per week, "1/30" for one day per month, "1/90" for one day per quarter, etc.)
- 9. Enter "Sample Type" both as "Sample Measurement" (actual sample type used during monitoring period) and as "Permit Requirement", (e.g. Enter "Grab" for individual sample, "24HC" for 24-hour composite, "CONT" for continuous monitoring, etc.)
- Where violations of permit requirements are reported, attach a brief explanation to describe cause and corrective actions taken, and reference each violation by date.
- 11. If "No Discharge" occurs during monitoring period, check the box for "No Discharge".
- 12. Enter "Name/Title of Principal Executive Officer" with "Signature of Principal Executive Officer or Authorized Agent", "Telephone Number", and "Date" at bottom of form.
- 13. Mail signed Report to Office(s) by date(s) specified in permit. Retain copy for your records.
- 14. More detailed instructions for use of this Discharge Monitoring Report (DMR) form may be obtained from Office(s) specified in permit.

# Legal Notice

This report is required by law (33 U.S.C. 1318; 40 C.F.R.125.27). Failure to report or failure to report truthfully can result in civil penalties not to exceed \$10,000 per day of violation; or in criminal penalties not to exceed \$25,000 per day of violation, or by imprisonment for not more than one year, or by both.

CN-0759 RDA 2366